| Applicant(s): JOHNSON, Donald B. et al  Application No. Filing Date Examiner Customer No. Group Art Unit O9/173,665 02/02/2001 KLIMACH, Faula W. 000293 2135 7060  Invention: MASKED DIGITAL SIGNATURES  Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria. VA 22313-1450  Transmitted herewith are the following for the above-identified application.  Issue Fee Transmittal Form PTOL-85  Utility Fee: \$1400.00 Design Fee: Plant Fee:  Publication Fee: \$300.00  A check in the amount of is attached.  The Director is hereby authorized to charge and credit Deposit Account No. as described below.  Charge the amount of Credit any overpayment.  Charge any additional fee required.  Payment by credit 2ard. Form PTO-2038 is attached.  WARNING: Information and this form may become public. Credit card information should not be Included on this form. Provide credit card information and authorization on PTO-2038. |
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| Invention: MASKED DIGITAL SIGNATURES    Mail Stop Issue Fee   COMMISSIONER FOR PATENTS   P.O. Box 1450   |
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| Dated: July /£ , 2007  |
|  |
| Signature /  |
| Ralph A. Dowell (Reg. No. 26,868)  |
| Dowell & Dowell, P.C. Suite 406, 2111 Figenbower Avenue  |
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PART B - FEE(S) TRANSMITTAL

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|   | PILING DATE   |  | FIRST NAMED INVENTO  | ATT   | ORNEY DOCKET NO.   | CONFIRMATION NO.  |  |
| 09/173,665 02/02/2001 Donald B. Johnson 6944-8-1 7060 TITLE OF INVENTION: MASKED DIGITAL SIGNATURES   |   |  |  |   |  |   |  |
| APPLN, TYPE   | SMALL ENTITY  | ISSUE PEE DUE  | PUBLICATION FEE DUE  | PREV. PAID ISSUE PEE  | TOTAL FEE(S) DUB   | DATE DUE  |  |
| nonprovisional  | NO  | \$1400   | \$300  | \$0   | \$1700   | 07/18/2007  |  |
| BXAMINER  |   | ART UNIT   | CLASS-SUBCLASS   | 7 0//19/20  | 37 ACONCAF2 000001   |   |  |
| KLIMACH, F  | KLIMACH, PAULA W  |  | 713-180000   | 5   |  | 1400.03 OP  |  |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) strached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assigned data will appear on the patent. If an assignee is identified below, the document has been filed for (A) NAME OF ASSIGNER |   |  |  |   |  |   |  |
| Certicon Corp. Mississauga, Canada  |   |  |  |   |  |   |  |
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| 5. Change In Entity Status (from status indicated above)  |   |  |  |   |  |   |  |
| a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27)  D b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).  NOTE: The Issue Foc and Publication Fos (if equired) will not be accepted from snyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Endomark Office.  |   |  |  |   |  |   |  |
| Authorized Signature Date Suly 18 2007  |   |  |  |   |  |   |  |
| Typed or printed name   | Ralph A.  | DOWEL  |  | Registration No.  | 10, 868  | <del></del>   |  |
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